

Community Alternatives Program for Children (CAP/C) Policy Change Recommendations presented by the Eligibility Workgroup

Proposed Policy Coverage Criteria for Medical Fragility	Current Policy Criteria for Medical Fragility
Criterion A A medically fragile individual has a primary chronic medical condition or diagnosis (physical rather than psychological, behavioral, cognitive or developmental) that has lasted, or is anticipated to last, more than 12 months	Criterion A A primary medical (physical rather than psychological, behavioral, cognitive, or developmental) diagnosis(es) to include chronic diseases or conditions including but not limited to chronic cardiovascular disease, chronic pulmonary disease, congenital anomalies, chronic disease of the alimentary system, chronic endocrine and metabolic disorders, chronic infectious disease, chronic musculoskeletal conditions, chronic neurological disorders, chronic integumentary disease, chronic renal disease, genetic disorders, oncologic and hematologic disorders. To meet this criterion, a physical medical condition must be the primary debilitating condition
Criterion B: The individual's chronic medical condition: <ol style="list-style-type: none"> 1. Requires medically necessary ongoing specialized treatments or interventions (treatments or interventions that are supervised or delegated by a physician or registered nurse) without which will likely result in a hospitalization; or 2. Resulted in at least four (4) exacerbations of the chronic medical condition requiring urgent/emergent physician-provided care within the previous 12 months; or 3. Required at least one inpatient hospitalization of more than 10 calendar-days within the previous 12 months; or 4. Required at least three inpatient hospitalizations with the previous 12 months; 	Criterion B: A serious, ongoing illness or chronic condition requiring prolonged hospitalization (more than 10 days, or 3 admissions) within 12 months, ongoing medical treatments nursing interventions
Criterion C: The individual chronic medical condition: <ol style="list-style-type: none"> a. Requires the use of life-sustaining device(s); or b. Requires life-sustaining hands-on assistance to compensate for the loss of bodily function; or c. Requires non-age-appropriate hands-on assistance to prevent deterioration of the chronic medical condition without which will likely result in an inpatient hospitalization. 	Criterion C: A need for life-sustaining devices or life-sustaining care to compensate for the loss of bodily function including but not limited to endotracheal tube, ventilator, suction machines, dialysis machine, J-Tube and G-Tubes, oxygen therapy, cough assist device, and chest PT vest
Proposed definition for At-risk of institutionalization An individual or active waiver participant who is a member of the target population and meets a clinical determination of level of care (LOC), and the need-based assessment identifies reasonable indication of need for at least one or more of the services offered in the waiver to maintain community placement or integration thus avoiding the potential of an institutional placement. Reasonable indication that: <ol style="list-style-type: none"> (a) at least one waiver service, at least monthly; or (b) Short-term CAP/C participation required for monthly monitoring when services are furnished on less than a monthly basis. 	Current policy definition for At-risk of institutionalization A participant who is a member of the target population and meets nursing facility level of care (LOC) criteria with assessed acuity of needs ranging from intermediate to hospital level and who do not have available resources to meet immediate needs - medical, psychosocial and functional. Resources consist of both formal and informal such as willing and able family members.